

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Duckworth for Congress

A. Full Name (Last, First, Middle Initial) Kevin Shanley		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 17 / 2012	
Mailing Address 900 N Lake Shore Dr Apt 805		Transaction ID : C3942130	
City Chicago	State IL	Zip Code 60611-1530	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Self-Employed	Occupation Consultant		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
B. Full Name (Last, First, Middle Initial) Mark C. Shields		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 12 / 2012	
Mailing Address 1660 N Hudson Ave		Transaction ID : C3936268	
City Chicago	State IL	Zip Code 60614-5671	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Advocate Health Care	Occupation Physician		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		
C. Full Name (Last, First, Middle Initial) Clyde E Shorey Jr.		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 23 / 2012	
Mailing Address 3033 W Lane Kys NW		Transaction ID : C3948533	
City Washington	State DC	Zip Code 20007-3057	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer None	Occupation Retired		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		
SUBTOTAL of Receipts This Page (optional).....		1500.00	
TOTAL This Period (last page this line number only).....			